

Applied Survival Analysis

Lab 9: Time-dependent covariates

In today's lab, we are going to get familiar with time-dependent covariates. We will use the Stanford heart transplant dataset (*naïve.dta*). In this study 103 patients waiting for a heart transplant were followed for survival. Here is a description of the file:

```
describe
  obs:          103
  vars:         12                               19 Dec 2003 15:31
  size:        5,356 (99.5% of memory free)
-----
variable name  storage  display  value  variable label
              type    format   label
-----
patid         float    %9.0g   Patient identifier
year          float    %9.0g   Year of acceptance
age           float    %9.0g   Age
fail          float    %9.0g   Survival status (1=dead)
survtime      float    %9.0g   Survival time
priorsurg     float    %9.0g   Surgery
transplant    float    %9.0g   Heart transplantation status
              (1=yes)
waitime       float    %9.0g   Waiting time for transplant
missallele    float    %9.0g
missantigen   float    %9.0g
missscore     float    %9.0g
time          float    %9.0g   Survival time (correction for
              id=38)
-----
Sorted by:  patid
```

There is one record for each patient and the important variables in the framework of time-dependant analysis are **id**, **transplant**, **waitime**, **fail** and **time**.

A naive approach for estimating the effect of transplantation to the hazard ratio of having vs not having a new heart is to apply a Cox model to the above dataset by considering the transplantation status as a fixed binary covariate.

```
. stset time, f(fail)

      failure event:  fail != 0 & fail < .
obs. time interval:  (0, time]
exit on or before:  failure
-----
      103 total obs.
       0 exclusions
-----
      103 obs. remaining, representing
      75 failures in single record/single failure data
31948.1 total analysis time at risk, at risk from t =          0
              earliest observed entry t =          0
              last observed exit t =          1799

. stcox transplant, nohr

      failure _d:  fail
analysis time _t:  time

Iteration 0:  log likelihood = -298.31514
Iteration 1:  log likelihood = -287.817
Iteration 2:  log likelihood = -285.44061
Iteration 3:  log likelihood = -285.44037
Refining estimates:
Iteration 0:  log likelihood = -285.44037

Cox regression -- Breslow method for ties
No. of subjects =          103          Number of obs =          103
No. of failures =           75
```

```

Time at risk      =      31948.1
Log likelihood    =    -285.44037
LR chi2(1)       =      25.75
Prob > chi2      =      0.0000

```

```

-----
      _t |      Coef.   Std. Err.      z    P>|z|     [95% Conf. Interval]
-----+-----
transplant | -1.318887   .2439952    -5.41  0.000   -1.797109   -.8406655
-----

```

The estimated coefficient is associated with a hazard ratio of 0.267, which implies that patients with a new heart have about 4 times less hazard to die than those without a new heart. This analysis handles transplantation status as a fixed covariate and does not account for the fact that a very high hazard is likely to follow transplantation.

To perform an analysis involving time-updated transplant status we need to transform the dataset by creating multiple lines per subject.

To understand the structure of the dataset that we are going to produce, let's take a look at the original data.

```

. li patid transplant waitime survtime time fail if patid==38 | patid==16 |
pat==12 | pat==80, clean

```

patid	transp~t	waitime	survtime	time	fail
12	0	.	8	8	1
16	1	28	308	308	1
38	1	5	5	5.1	1
80	1	26	482	482	0

Patient 12 never received a new heart. He died 8 days after acceptance while still on the waiting list. Patient 80 did receive a new heart 26 days after acceptance and he survived until the end of follow-up. Patient 38 died the day of the heart transplantation, 5 days after acceptance. Such cases would be excluded from the statistical software, so we add a small fraction (0.1) to the survival time (time=5.1 instead of 5)

Our goal is to turn this into a dataset that contains the histories of each patient, that is we want records that appear as follows:

patid	transp~t	waitime	time	fail
12	0	.	8	1
16	0	28	28	0
16	1	28	308	1
38	0	5	5	0
38	1	5	5.1	1

This means that for patients who get a new heart we want to have 1 record for the follow-up period before the transplantation and 1 record for the period after. For this reason we apply the following commands:

```

expand 2 if transplant
(69 observations created)
sort patid

```

This will cause a duplication of the records for patients who had transplant=1. The new file contains 172 observations.

```
. li patid transplant waittime time fail if pat==12 | pat==16 | pat==38 | pat==80,
clean
      patid  transp~t  waittime  time  fail
17.      12          0          .    8    1
23.      16          1         28   308   1
24.      16          1         28   308   1
60.      38          1          5    5.1   1
61.      38          1          5    5.1   1
132.     80          1         26   482   0
133.     80          1         26   482   0
```

So we got 1 observation for patient 12 who had transplant=0 and 2 for the rest who had transplant=1. The problem is that patients with 2 records have identical values for all the variables, so **time, fail and transplant** (the time-dependent covariate in this example) do not reflect the transplantation and failure history. Within the records of each patient we replace this variables as follows:

```
by patid:replace time=waittime if _n==1 & transplant
by patid:replace fail=0 if _n==1 & trans
by patid:replace transplant=0 if _n==1 & transplant
```

Thus the above records are now:

```
      patid  transp~t  waittime  time  fail
17.      12          0          .    8    1
23.      16          0         28   28    0
24.      16          1         28   308   1
60.      38          0          5    5    0
61.      38          1          5    5.1   1
132.     80          0         26   26    0
133.     80          1         26   482   0
```

Our data have now the desired form. Save this file with a new name e.g. *transplant.dta*. Let' s now stset the new dataset.

```
. stset time, f(fail) id(patid)
      id: patid
      failure event: fail != 0 & fail < .
obs. time interval: (time[_n-1], time]
exit on or before: failure

-----
172 total obs.
  0 exclusions
-----

172 obs. remaining, representing
103 subjects
 75 failures in single failure-per-subject data
31948.1 total analysis time at risk, at risk from t = 0
      earliest observed entry t = 0
      last observed exit t = 1799
```

The option `id(patid)` specifies the subject-id variable and indicates that observations with the same id refer to the same patient.

To estimate the effect of heart transplantation we apply the following Cox model.

```
. stcox transplant, nohr
```

```

failure _d: fail
analysis time _t: time
id: patid

Iteration 0: log likelihood = -298.31514
Iteration 1: log likelihood = -298.25194
Iteration 2: log likelihood = -298.25193
Refining estimates:
Iteration 0: log likelihood = -298.25193

Cox regression -- Breslow method for ties

No. of subjects =          103          Number of obs =          172
No. of failures =           75
Time at risk   =       31948.1
Log likelihood = -298.25193          LR chi2(1) =          0.13
                                      Prob > chi2 =          0.7222

-----
      _t |      Coef.   Std. Err.      z    P>|z|     [95% Conf. Interval]
-----+-----
transplant | .1057311   .2984149     0.35   0.723    - .4791513   .6906136
-----

```

The estimated coefficient corresponds to a hazard ratio of 1.11 in favor of subjects who did not take a new heart, that is after heart transplantation the hazard for death increases by 11%.